



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

GHQ Academy

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 204102		DATE OF INSPECTION 6/2/2009	
LOCATION OF INSTRUMENT (STREET AND CITY) 1510 E. Elm St., Jefferson City		TIME OF INSPECTION 15:11	
CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.			
<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)			
<input checked="" type="checkbox"/> COMPUTER		<input checked="" type="checkbox"/> DETECTOR	
<input checked="" type="checkbox"/> PROGRAM		<input checked="" type="checkbox"/> FILTERS	
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER +50°C		<input checked="" type="checkbox"/> QUARTZ STANDARD	
<input checked="" type="checkbox"/> FLOW DETECTOR		<input checked="" type="checkbox"/> CALIBRATION	
<input checked="" type="checkbox"/> PUMP HIGH SPEED		<input checked="" type="checkbox"/> PRINTER	
<input checked="" type="checkbox"/> INDICATOR LIGHTS			
<input checked="" type="checkbox"/> TIME AND DATE 13:15 6/2/2009			
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) +34.13°C			
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)			
<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)			
TEST 1	.098	TEST 2	.099
TEST 3	.099		
<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED)			
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)			
REFUSALS	0	(0-.04)	0
		(.05-.09)	0
		(.10-.14)	0
		(.15-.19)	0
		(Over .19)	0
List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary) <u>Upgraded firmware from 12-15-1999 to 04-07-2009. Reset time of instrument (DST).</u>			
Guth Laboratories, lot #08340, expiring 10/15/2009			
INSPECTING OFFICER			
SIGNATURE 		PRINT NAME Dewayne D. Carver	
TYPE II PERMIT NUMBER 720219		TELEPHONE NUMBER (573) 751-4722	



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 2009 at 11:59 PM.**

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204102

06/04/09
15:11

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS
SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS:
QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!#\$%&'()*+,-./0123456789:;<=>?@ABCDEF
HIJ KLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnop
qrstuvwxyz{|}~

OPERATOR SIGNATURE

Card Stock No.
80021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1000 ST. LOUIS, MO 63108

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

BACDATAMASTER SERIAL NUMBER 204102
06/04/09

TESTING OFFICER:

CARVER/DEWAYNE/D

OFFICER I.D.: C41

PERMIT NUMBER: 720219

EXPIRATION DATE: 10/29/09

MISCELLANEOUS DATA:

.10 VAPOR CALIBRATION CHECK

GUTH LABS LOT 08340 EXP 10/15/2009

--- SUPERVISOR MODE ---

BLANK TEST	.000	15:14
INTERNAL STANDARD	VERIFIED	15:14
EXTERNAL STANDARD	.098	15:14
BLANK TEST	.000	15:15
EXTERNAL STANDARD	.099	15:15
BLANK TEST	.000	15:16
EXTERNAL STANDARD	.099	15:16
BLANK TEST	.000	15:17

N = 3

SIM. = .1

AVG. = .0986

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204102
06/04/09

ARREST TIME: 00:00

SUBJECT NAME:

X

DOB: 01/01/01 SEX: M

STATE/D.L.: XX/X

ARRESTING OFFICER:

X

OFFICER I.D.: X

TESTING OFFICER:

CARVER/DEWAYNE/D

OFFICER I.D.: C41

PERMIT NUMBER: 720219

EXPIRATION DATE: 10/29/09

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	15:18
INTERNAL STANDARD	VERIFIED	15:18
SUBJECT SAMPLE	.000	15:19
RADIO INTERFERENCE		

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



DEWAYNE D. CARVER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):


DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 10/29/07

Number 720219

Expires 10/29/2009


Director of State Public Health Laboratory


Director, Department of Health